

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 300
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Make DC Listen

Full Name (Last, First, Middle Initial)

A. Paul Grasso

Mailing Address 427 Lowell Ln

City	State	Zip Code
Richardson	TX	75080-4529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Centennial Medical CenterOccupation
Hosp Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	31	/	2016

Transaction ID : A5C89CBA2CB214F76BCE

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Garth Merrick

Mailing Address 101 SE 11th Ave

City	State	Zip Code
Amarillo	TX	79101-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Ag Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	31	/	2016

Transaction ID : A7A128CC62B9D48E0997

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Jerry M. Davidson

Mailing Address 10333 E Vista Montanas

City	State	Zip Code
Hereford	AZ	85615-9797

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	31	/	2016

Transaction ID : A1D68C83036F94D189D2

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

10250.00

TOTAL This Period (last page this line number only)..... ►